

**Title:** “SSB\* and the Importance of Water”- an Interactive Center lesson, adaptable for Interactive Self Study Notebook and **Low Risk Nutrition Education conducted remotely**

\*SSB-Sugar Sweetened Beverages, such as soda, juice drinks, sports drinks, sweetened tea, vitamin water, energy drinks

**Target Audience:** Children, Pregnant, Breastfeeding and Postpartum Women,  
optional – **To include Infants > 6 months** – LAs must use the infant display page, Tips and Tricks-Baby Bottle Tooth Decay

**Objectives:** The client or caregiver will be able to:

1. Identify three or more sugar-sweetened beverages (SSB).
2. Describe the importance of water for our health.
3. Choose one or more ways to help their family avoid or decrease the use of SSBs and consume more water.

**Teaching Materials Needed, Including Handouts:**

1. The LA should choose at least five of the display pages offered by the SA, to attach to the display, bulletin board or wall. Print the chosen display pages from the WIC website. If unable to print them, request them from the SA. Note: If the LA plans to use this lesson for infants 6 months or older, the display page, *Tips and Tricks – Baby Bottle Tooth Decay* must be used.
2. Make copies of all handout materials. The handout designated for this lesson can be ordered from the State Agency or it is posted on the WIC website and the LA can print it. If the LA chooses, they can select and print additional handouts.
3. Discussion guide created by the LA for this lesson.
4. If an agency has a Smart TV, electronic notebook, or laptop, set it up to show some of the recommended video clips from the WIC Health Channel. (For remote access, clients can access the WIC Health Channel on the [kansaswic.org](http://kansaswic.org) main page.)
5. Recommended WIC Health Channel video clips for this lesson:
  - a. Beverage Basics for Healthy Families
  - b. Beverage Choices for Toddlers
  - c. Limit All Soda and Sugary Drinks

**Advance Preparation Needed:**

1. Order handouts and select any video clips that will be used.
2. Create a discussion guide, on a note card or paper, for the designated staff person(s) who will be interacting with the client/caregiver. This guide will be used throughout the time that the lesson is used. Suggested questions that can be used on the guide are listed below, under #7 of *Outline and Methods*.
3. The Nutrition Services Coordinator should review the materials and discussion guide with all pertinent staff.
4. Make copies of materials, as needed.
5. Assemble the display.

6. Cue up any recommended WIC Health Channel clips, if they will be used on the Smart TV, electronic notebook or laptop. Have this viewable for clients.
7. For remote use (phone or video link), try to contact the client ahead of time to set a time they will be available to discuss the lesson. Explain that the handout for this lesson, *Make Every Sip Count*, will be emailed or mailed to them and they will need it during the phone call. Email the handout and send the links to the pages on the WIC website to the client. Then complete steps 7 through 10 under *Outline and Methods*. If the client does not have email capability, mail the handout. As a last resort, direct the client to the handout posted on the [kansaswic.org](http://kansaswic.org) website.

### Outline and Methods:

1. The display will be viewable during clinic hours.
2. A knowledgeable staff member will be available for client/caregiver questions regarding the lesson. See background information on this topic below, under *Concepts*.
3. For clients/caregivers that are supposed to complete the lesson, a staff member will direct them to the display, give them a notebook, or call and discuss the lesson with client/caregiver.
4. Clients completing the lesson in person should be told that they can take any handouts included with the display.
5. Clients completing the lesson remotely (staff phone call), should be referred to the lesson pages on the WIC website. The clinic should email (if possible) or mail the handout for this lesson to the client, which will prompt them to set a goal.
6. For clients using the display/notebook, once they read the materials, they should return to a designated staff member.
7. The staff member should be prepared to talk to the client about the lesson, whether it is completed in person (display or notebook) or remotely through staff discussion via phone call. Some of the discussion questions below could be used or develop your own similar discussion questions. It is recommended that a note card or paper with the discussion questions be posted at the staff person's desk. Discussion questions should be open-ended and prompt the client to name an action they could try (how their family might reduce their SSB consumption, how they can increase their family's water intake). **The action the client says they could try is their goal for this lesson.** These are some open-ended questions that could be used.
  - i. "What is something you learned today?"
  - ii. How do you think you could help your family drink fewer sugary drinks?"
  - iii. "What is something you would like to try to help your family drink more water?"
  - iv. "What is something that you plan to try at home?"
- (Discussion with the client/caregiver is a USDA requirement!)
8. The designated WIC staff person asks the client/caregiver if they have any questions. If yes, the staff person either answers the question(s) or refers them to the staff person that can answer their questions.
9. Upon completion, a designated WIC staff person documents the lesson in the client's KWIC record by selecting (moving over) under the Nutrition Education Topic tab in KWIC:
  - a. *Sugar-sweetened beverages* **AND/OR**
  - b. *The importance of drinking water* **AND**
  - c. one of the two "Trigger Topics" below, whichever is appropriate for this client
    - i. #1 Secondary Nut. Ed. For PG, PP, or before Midcert for I, BF, C
    - ii. #2 Secondary Nut. Ed. After Midcert for I, BF, C

10. Staff are encouraged to document the client's goal (what they plan to do) in KWIC, under the Nutrition Education Goal tab.

### Concepts and Key Points:

1. Beverages that are calorie-free—especially water—or that contribute beneficial nutrients, such as fat-free and low-fat milk (whole milk for one-year old's) and 100% juice (in appropriate serving sizes), should be the primary beverages consumed. Children under 1 year of age (infants) should be given only breastmilk or formula.
2. Water is essential to health, and many people don't drink enough of it.
3. One of MyPlate's key consumer messages is to replace sugary drinks like soda and sports beverages with water.
4. Drinking water can prevent dehydration, a condition that can cause unclear thinking, result in mood change, cause your body to overheat, and lead to constipation and kidney stones.
5. Most of your fluid needs are met through the water and beverages you drink. You can get some fluids through the foods that you eat – especially foods with high water content, such as many fruits and vegetables.
6. As plain drinking water has zero calories, it can also help with managing body weight and reducing caloric intake when substituted for drinks with calories, like regular soda.
7. Another alternative for SSBs is juice. While 100% juice does contain beneficial nutrients, it can still be a hiding place for a surprising amount of sugar. Except for infants, water and milk should be the first choices for beverages, while juice should only be consumed in small servings. Additionally, make sure to check the label and purchase 100% juice, not juice drinks. Check the label for the words: 100% juice.
8. The leading contributor of empty calories consumed by children and teens (aged 2-18 years) is calories from SSBs.
9. Children and adolescents from low socioeconomic status households are more likely to be heavy consumers ( $\geq 500$  kcal/day) of SSBs.
10. Consumption of SSBs may lead to excess weight gain, type 2 diabetes, and cardiovascular issues.
11. Higher consumption of added sugars is associated with increased dental caries in children, which can affect levels of dental caries into adulthood.
12. A study with third-grade children found that for each additional sugary drink consumed per day, the third grader's risk of developing dental caries increased by 22%.
13. Americans purchased less soda (regular and diet) and fruit drinks from 2010 to 2013, but increased their purchase of other SSBs such as flavored water, sports drinks, and energy drinks.
14. The American Academy of Pediatrics advises that children and adolescents **should never consume energy drinks** because of the potential health risks associated with the stimulants that energy drinks contain.
15. Is there a recommended daily limit for added sugar? The American Heart Association recommends limiting your daily sugar intake:

**Children under 2 years of age:** No added sugars

**Children 2 – 18 years of age:** Less than 24 grams (or 6 teaspoons)

**Adult women:** 24 grams (or 6 teaspoons)

**Adult men:** 36 grams (or 9 teaspoons)

16. Do you know how much sugar is in one 12-ounce regular soft drink? About 10 teaspoons! What about a 20-ounce juice drink? About 17 teaspoons! Or a 20-ounce sports drink? About 9 teaspoons.

Or a 20-ounce bottle of sweetened tea? It has about 14 teaspoons. You might think vitamin added water has no added sugar, it is water, right? It might include water but it also has about 8 teaspoons of sugar.

And what about tap water or plain bottled water? These have no sugar, yes, no sugar!!

**Interactive Component:** See #7 and #8 of *Outline and Methods*

#### **Procedure for Clients to Ask Questions of Trained WIC Staff:**

Upon completion of the lesson, the designated WIC staff person will ask all client/caregivers if they have any questions. If so, the staff person will either answer the questions or guide the client/caregiver to the staff person qualified to answer the question.

#### **Evaluation:**

The evaluation will consist of the client/caregiver sharing information they learned with WIC staff. See #7 and #8.

#### **Adapting this lesson for an Interactive Self Study Notebook:**

1. Place copies of the set of pages for attaching to the display into sheet protectors. Include both English and Spanish versions of the pages.
2. Insert these into a notebook.
3. Give each client using this Self Study notebook a copy of any handouts to take home.
4. See the Outline and Methods section above. Follow the same steps used for the interactive center. Steps #6 and #7, the interactive component, is a USDA requirement.

#### **Adapting this lesson for use remotely:**

1. For remote use (phone or video link), try to contact the client ahead of time to set a time they will be available to discuss the lesson. Explain that the handout for this lesson, *Make Every Sip Count*, will be emailed or mailed to them and they will need it during the phone call. Email the handout and send the links to the pages on the WIC website to the client. Then complete steps 7 through 10 under *Outline and Methods*. If the client does not have email capability, mail the handout. As a last resort, direct the client to the handout posted on the [kansaswic.org](http://www.kansaswic.org) website.
2. For remote access, clients can access the WIC Health Channel on the [kansaswic.org](http://www.kansaswic.org) main page.
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This lesson, including handout, are posted on the WIC website:

[http://www.kansaswic.org/nutrition\\_education/lesson\\_plans.html](http://www.kansaswic.org/nutrition_education/lesson_plans.html)

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